



PATENT APPLICATION  
Attorney's Do. No. 2705-96

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent application of: Richard Foltak  
Edward Groenendaal

Serial No. 09/587,164

Group No. 2742

Filed: June 2, 2000

Examiner: Not yet known

Title: **CONFIGURABLE DIGIT COLLECTION FOR VARIOUS SIGNALING PROTOCOLS**

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TC 2700 MAIL ROOM

Assistant Commissioner for Patents  
Washington, D.C. 20231

REQUEST FOR CORRECTION OF FILING RECEIPT

The Filing Receipt (Exhibit A) for the above-identified application indicates a title of "CONFIGURABLE DIFIT COLLECTION FOR VARIOUS SIGNALING PROTOCOLS."

The title of the patent application as indicated in the Express Mailing, dated June 2, 2000, Certificate Label No. EL532247534US, is "CONFIGURABLE DIGIT COLLECTION FOR VARIOUS SIGNALING PROTOCOLS."

Applicant requests correction of the Filing Receipt to indicate a correction of the title to "CONFIGURABLE DIGIT COLLECTION FOR VARIOUS SIGNALING PROTOCOLS."

<p><b>CERTIFICATE OF MAILING</b></p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231</p> <p>Date: <u>October 13, 2000</u></p> <p><u>Corinne Ryan</u></p> <p>Corinne Ryan</p>
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Respectfully submitted,

MARGER JOHNSON & McCOLLOM, P.C.

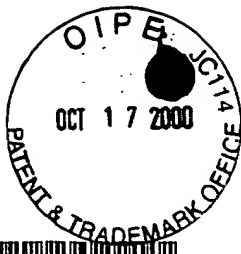
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## FILING RECEIPT



\*OC000000005289776\*

UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark OfficeAddress: ASSISTANT SECRETARY AND  
COMMISSIONER OF PATENT AND TRADEMARKS  
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/587,164	06/02/2000	2742	864	2705-96	9	21	5

20575  
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Date Mailed: 08/02/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

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## Continuing Data as Claimed by Applicant

## Foreign Applications

If Required, Foreign Filing License Granted 08/02/2000

## Title

Configurable difit collection for various signaling protocols

## Preliminary Class

379

Data entry by : MOLLISH, CHRISTINE

Team : OIPE

Date: 08/02/2000

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Ex A  
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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/587,164	<b>FILING DATE</b> 06/02/2000 <b>RULE</b> -	<b>CLASS</b> 379	<b>GROUP ART UNIT</b> 2742 2642	<b>ATTORNEY DOCKET NO.</b> 2705-96	
<b>APPLICANTS</b> Richard Foltak, Santa Clara, CA ; Edward Groenendaal, Hornsby NSW, AUSTRALIA;					
<b>** CONTINUING DATA *****</b> none HA					
<b>** FOREIGN APPLICATIONS *****</b> none HA					
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 08/02/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>[Signature]</i> <i>HA</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b>					
20575					
<b>TITLE</b>					
Configurable digit collection for various signaling protocols					
<b>FILING FEE RECEIVED</b> 864	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		